

NOTICE OF PRIVACY PRACTICES

CALIFORNIA DEPARTMENT OF VETERANS AFFAIRS DIVISION OF VETERANS HOMES

Effective June 1, 2006

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY

INTRODUCTION

The purpose of this notice is to inform you of the privacy practices of this facility. In providing care and services to you, California Veterans Home (Home) develops, receives and keeps identifiable health information about you. This is your "Protected Health Information", referred to as PHI in this notice. Examples of PHI include diagnosis; medical and social history; exam and health consultation reports; X-ray and lab reports; medication records; physical, rehabilitative and other therapy assessments; and doctors' and nurses' notes.

Each individual's PHI is protected by a federal law called the Health Insurance Portability and Accountability Act (HIPAA) and by State laws when they are stricter than HIPAA. These laws require the Home to keep PHI private except under certain circumstances, and to provide this Notice of Privacy Practices (NPP), describing the procedures we use to protect your PHI. The Home reserves the right to revise the terms of this NPP at any time and to make the new notice provisions effective for all PHI that it maintains. Upon your request, we will provide you with any revised Notice of Privacy Practices by accessing our website at www.cdva.ca.gov, calling the office and requesting that a revised copy be sent to you in the mail or asking for one at your next appointment.

HOW WE MAY USE AND DISCLOSE PHI

The law permits the Home to use and disclose your PHI for treatment, payment or health care operations without your authorization. "Use" means to share PHI within the California Department of Veterans Affairs (CDVA), of which the Home is a part. "Disclose" means to release PHI to anyone or any entity outside CDVA.

Following are <u>examples</u> of permitted types of uses or disclosures.

Treatment:

- To health care providers to assist in diagnosing a health care condition, carry out health care services or provide medication.
- To conduct lab tests or provide consultative health care services.

Payment:

- As a source for supporting the billing to pay for your treatment. This may include certain activities that your health insurance plan may undertake before it approves or pays for the health care services we recommend for you such as; making a determination of eligibility or coverage for insurance benefits, reviewing services provided to you for medical necessity, and undertaking utilization review activities. For example, obtaining approval for a hospital stay may require that your relevant PHI be disclosed to the health plan to obtain approval for the hospital admission.
- To establish your eligibility for health benefit programs.
- To allow other health care providers to determine if they are owed any reimbursement for care they provided to you, and how much is owed.

Health care operations:

- To conduct quality assessment and improvement activities.
- To review services provided or licensing, accreditation or related issues.

USES AND DISCLOSURES WITHOUT YOUR WRITTEN AUTHORIZATION

• To the Secretary of the federal Health and Human Services Agency in connection with compliance reviews and complaint investigations.

Other such uses and disclosures are:

- Special Directory The Home's Special Directory has certain information about residents to be provided to the clergy serving the Home or others who ask for residents by name. Unless you notify the Home that you object, such information about you will be included in the Directory, such as your name, your location in the Home, your general condition and your religious affiliation.
- To someone who will be involved in your care if you leave the Home.
- Disaster Relief to entities providing disaster relief efforts.
- For public health activities and purposes to a public health authority that is permitted by law to collect or receive the information.
- Business Associates to Business Associates as needed for them to perform functions on the Home's behalf, such as data processing, legal or accounting services.
- Research for a research project, when approved by an institutional review board to ensure the privacy of PHI disclosed.
- Organ Procurement upon your death, to an organ procurement entity to aid in using your organs or tissues in transplantation.
- We may disclose your PHI, according to state law, to a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading the disease or condition.
- To Medical Examiners, Coroners or Funeral Directors.
- For health care appointment reminders.
- With Home staff to the extent needed for such staff to perform legitimate functions on the Home's behalf.

- To the federal Department of Veterans Affairs to determine your eligibility for certain benefits.
- For workers' compensation purposes.
- For Home community meetings, such as prayer meetings, award and memorial services
- For orders or subpoenas of a court, administrative tribunal or private arbitrator.
- To law enforcement agencies in response to a search warrant, court order or court-ordered subpoena or investigative subpoena or summons.
- To fulfill any reporting obligation required by law about a Home resident suspected to be a victim of elder abuse.
- For national security.
- When otherwise required by law. You will be notified, if required by law, of any such uses or disclosures
- Incidental disclosures PHI may be accidentally disclosed in statements or conversations.

OTHER USES AND DISCLOSURES MAY BE MADE WITH YOUR WRITTEN PERMISSION

The Home will make no other disclosures of your PHI without your written authorization. You have the right to revoke your authorization in writing at any time to stop any future uses or disclosures.

STATEMENT OF RIGHTS

You have the following rights:

- Request Access Inspect and receive a copy of your PHI maintained by the Home.
 In some circumstances, the Home may deny your request as permitted by law. In
 such cases, you would have an opportunity to have such denial reviewed by an
 independent, licensed health care professional who was not involved in the denial
 decision. We may charge you a small amount for the copies to cover our cost.
- Request Amendment You may request an amendment to your PHI. If this request is denied, you will be given a written denial, which includes the reason(s) for the denial and an opportunity to submit a written statement disagreeing with the denial. The Home will keep this statement with your records.
- Request Restrictions This includes requests for restrictions on use and disclosure for treatment, payment and health care operations and on providing information about you to persons inquiring about or involved in your care. The Home is not required to grant your request, but if it does it will comply with your request, except in emergency situations or until the restriction is terminated by you or the Home.
- Request Confidential Communications You may request that the Home communicate PHI with you by alternative means and in alternative locations.
- Accounting of Disclosures You may receive an accounting of disclosures of PHI
 created and maintained by the Home over the six years prior to the date of your
 request or for a lesser period. Such accounting is not required for the following
 disclosures: for treatment, payment or health care operations; your PHI provided to

you; information included in the Home's Special Directory; aiding in the identification or care of a resident, or; to any recipient of the PHI prior to April 14, 2003.

Receive a copy of this NPP at any time upon request.

HOW TO FILE A COMPLAINT

If you believe your privacy rights have been violated, you may file a complaint with the Home's Privacy Officer at one of the following addresses:

California Veterans Home – Yountville 100 California Drive Yountville, CA 94599 Attention: Kay Cavanaugh, Privacy Officer Phone: (707) 944-4831

California Veterans Home – Chula Vista 700 E. Naples Court Chula Vista, CA 91911 Attention: Grace DeGuzman, Privacy Officer (619) 205-1121

California Veterans Home – Barstow 100 E. Veterans Parkway Barstow, CA 92311 Attention: Penny Kush, Privacy Officer (760) 252-6315

Venus Andrade, Chief Privacy Officer 1227 O Street, Rm. 324 Sacramento, Ca 95814 (916) 651-7802

You may also contact your Social Service Worker or the Chief of Social Services.

Or

By contacting the Secretary of the United States Department of Health and Human Services at the address and phone numbers below:

Secretary of the U.S. Department of Health and Human Services

Office of Civil Rights, Region IX

Attention: Regional Manager

50 United Nations Plaza, Room 322

San Francisco, CA 94102 Phone: (800) 368-1019

Or

U.S. Office for Civil Rights at (866) OCR-PRIV (866-627-7748)

(866) 788-4989 TTY

Email: HHS.Mail@dhhs.gov